GENERAL INFORMATI							
Name of youth			Local	DCS office		Date (month, day, year)	
Name of agency							
Address of agency (number and street, city, state, and ZIP code)							
Name of contact person							
Telephone number of contact person Fax number of contact person				E-mail address			
()		()					
There is a limit of \$1,000 that may be expended for a youth throughout the provision of services through age 21.							
Requested #1	 	Requested #2			Requested #	quested #3	
Total approved	 	Total approved			Total approv	ed	
Approval is requested for the following emancipation goods and services items for the above-named youth. If approved, these items will be purchased within 45 days of date of approval. If signed approval is not used within 45 days, a new request will be made. Approved funds must be expended by the provider and are not to be given directly to the youth for purchase of goods or services.							
Items				Estimated Co	nated Cost App		Denial
For youth age 16-21							
Education/Training (GED & SAT prep courses, GED testing, driver education, college application fees; specify)							
Luggage							
Legal documents (birth certificate, state ID, driver's permit & license, etc.; specify)							
For youth age 17.6 who are transitioning to voluntary services to youth age 21 only who are receiving voluntary services (Youth eligible for voluntary IL case management services may access emancipation goods and services funding.)							
Start-up food staples (such as: sugar, flour, condiments, soup, cereal, crackers, etc., in the youth's own residence; does not include junk food, candy or similar items)							
Bedding (sleeping bag, sheets, blankets, pillows, etc.)							
Bathroom items (cleaning supplies, towels, shower curtain, rugs, paper supplies, etc.)							
Personal hygiene items (hair care products, deodorant, feminine products, toothpaste & brush, etc.)							
Telephone card (phone for landline; does not include cell phone)							
Household items (sweeper, brooms, trash cans, cleaning supplies, pots & pans, dishes, silverware, small microwave, tray tables, toaster, etc.; specify if item over \$75)							
Furniture (TV/VCR/DVD combo, futon, twin bed, minimally used furniture; specify if single item is over \$150)							
Transportation (bus passes, gas card or gas purchase, bicycle & helmet, minor repairs & tires if youth's own vehicle, car insurance, etc.; does not include purchase of vehicle; specify)							
Work related items (electrical, plumbing, carpentry, barber or cosmetology tools, apprentice fees, etc.; specify if item over \$50)							
Work related clothing (for interviews, uniforms, special shoes, safety glasses; specify)							
Moving expenses (true							
Other, specify and request approval from the State Independent Living Coordinator							
		-	TOTAL				
Lam indicating above	ve approval or denial of red	uested emancination	noods and	services for the	ahove-named	vouth An	nroval for items not

I am indicating above approval or denial of requested emancipation goods and services for the above-named youth. Approval for items not on the form may not be eligible for funding through Chafee and will become an expense to the county.

Local DCS office director or authorized designee's signature

Date (month, day, year)